

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number:

MHDE ASKAN

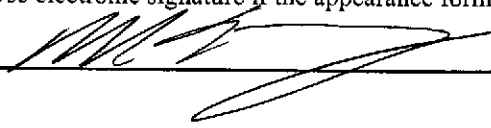
08CR36

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

MHDE ASKAN

FILED1-22-08
JAN 22 2008

**MICHAEL T. MASON
UNITED STATES MAGISTRATE JUDGE
UNITED STATES DISTRICT COURT**

NAME (Type or print) MICHAEL F. CLANCY	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ 	
FIRM	
STREET ADDRESS 53 W. JACKSON #1901	
CITY/STATE/ZIP CHIC. IL.	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 6244411	TELEPHONE NUMBER 312 427-0288
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input checked="" type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	